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DETERMINATION RECORD

TO Form P 10-875 Under the Paperwork Reduction Act of 1995 PATENT APPLICATION FEE DETERMINATION RECORD ... CLAINIS AS FILED - PART I (Column sy (Cotumn 2) BMALL ENTITY OTHER THAN SMALL ENTITY FOR OR HUMBER FILED BASIC FEE ()7 CFR 1.16(a)) MUMBER EXTRA RATE TOTAL CLAVILLE RATE (37 OFR 1.16(d) THOEPEHOENT CLAIMS त्यंतध्य २० = OR (07 OFR 1.16(b)) OR MULTIPLE DEPENDENT CLAIM PRESENT (D) OFR 1.16(4) OR ' if the difference in column 1 triless than zero, enter 'O' in column 2. OŘ TOTAL CLAIMS AS AMENDED - PART II OR: TOTAL (Cotumn 1). (Column 2) (Column 3) CLAIMS SMALL ENTITY OTHER THAN OR HICHEST CNOWENT SMALL ENTITY HUMBER AFTER **UGBENT** PREVIOUSLY TIONAL EXTRA ÆKNÜFM HATE ADOF. 07 CFR 1.10(c) Moun FEE TIONAL Endependent DICHR 1,1601 x 1.25 FEE x . 30 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM DT CFR 1.16(d) x s/ 0 0_ x 200. OR : +:/80 OR +,36Q TOTAL ADD'L FEE TOTAL (Column 1) OR ADD'L FEE (Column 2) CI A'MS CHAINING (Column 3) HIGHEST, O NUMBER PREVIOUSLY PRESENT. ÄÄTĖ AFTER AQOI-TIONAL EXTRA NOMENT PAID FOR PATE OF OTR 1,1600) ADDI-Minus TIONAL. Independent (31 CFR L1908) 6 Minus OR first, presentation of livetiple dependent claim (D) off 6(6(6)) -OR ĊŔ. TOTAL ADD'L FEE TOTAL OR (Column 1) ADD'L PEE (Column 2) (Column 3) Ď. CLAIMS REMAINING MUMBER PREVIOUSLY PRESENT AFTER KATĖ ADOIL TIONAL AMENDMENT EXTRA PAID FOR RATE ENDM Lotel Andres ADDI-TIONAL Minure FEE profes 1.46MI FEE OR X & " FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (3) CFR LIG(3) OR

ADDI FEE

ADDI FEE

OR ADDI FEE

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter 20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter 20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file fend by the number found in the appropriate . If you need azzitiance in completing the form, call 1-800-PTO-9199 and select option 2

OR